



COMMONWEALTH of VIRGINIA

DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

600 East Broad Street, Suite 1300

Richmond, VA 23219

June 8, 2017

ADDENDUM No. 1 TO VENDORS:

Reference Request for Proposal: RFI 2017-01

Dated: May 23, 2016

Due Date: June 12, 2016

Below are updates that may delete, add, modify or clarify certain aspects of the aforementioned RFI. Please incorporate as necessary.

1) See Attachment A for the Department of Medical Assistance Services response to questions/inquiries as submitted by potential Responders.

Sincerely,

Whitney Speece

DMAS Procurement & Contract Officer

Attachment A
RFI 2017-01, Addendum 1
Vendor Questions and Answers

Question Number	Section	Question/Comment	DMAS Response
1.		Based on the RFI language, it appears that Virginia is planning managed care expansions for certain types of services and populations (i.e., behavioral health, blind, elderly and disabled). Please confirm that the RFI covers financial oversight strategies for the future expansions as well as the current populations in managed care.	Yes, this RFI is also intended to cover financial oversight strategies for the future implementation of managed care for additional populations. The Virginia Medicaid program is in the process of launching a new managed care program, with the goal that nearly all Medicaid populations and services will be in managed care programs by 2018. This RFI covers financial oversight and service utilization monitoring of all services and populations in managed care on an on-going basis.
2.		If Question 1 is confirmed – In order to narrow down best practices, please clarify if Virginia has decided on the authority to pursue managed care expansions (e.g., 1115 waiver), and which authority that would be?	DMAS received waiver authority via amendments to Virginia’s 1915(b) and (c) waivers to operate the CCC Plus as a mandatory managed long term services and supports program. The approved waiver applications may be found on the CCC Plus webpage at http://www.dmas.virginia.gov/Content_pgs/mltss-psinfo.aspx .
3.		Please elaborate on the purpose of this RFI. Is it solely for general understanding of best practices in Medicaid trend analytics and other items specific to the JLARC report results, or is it also for evaluating potential vendors related to a future Medicaid actuarial RFP?	This RFI is for the general understanding of best practices in Medicaid trend analysis and to obtain insight into the development of enhanced managed care financial reporting and cost monitoring strategies. The Department will not use this RFI to evaluate potential vendors related to future RFPs, nor does this

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			RFI create a contractual obligation between the Department and responding organization.
4.		If a subsequent RFP is expected, when does the Commonwealth intend to publish it?	A publication date for any subsequent RFP regarding the topics addressed in this RFI is not available at this time.
5.		Is it the Department's expectation that vendors respond to all 6 projects in the RFI? Or can vendors pick and choose which projects to respond to?	Vendors may choose to respond to all six projects listed in the RFI, or they may limit responses to a subset of the projects. Vendors should clearly indicate which projects are addressed per the instructions in the RFI.
6.		Is there a prescribed or preferred format for putting together a response, or are vendors allowed to respond in a manner that they think would make the most sense?	There is no prescribed format for vendor responses beyond the instructions specified in the RFI.
7.		Question 2 in the Project Management section says, "What resources might your organization consider bringing to bear?" Can the Department please clarify what they mean by this question?	The vendor should indicate any resources necessary to achieve the project objectives. Resources may include staff requirements, technology capabilities, and data analytics programs, which the vendor already possesses and could potentially bring to bear to achieve the project objectives.
8.		Will participants that submit information be notified that their submissions were chosen for review?	All vendor submissions will be reviewed, as the Department is seeking to expand its knowledge on best practices in Medicaid managed care trend analysis, and to obtain insight

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			into financial reporting and cost monitoring strategies and the tools that would be required to achieve these objectives.
9.		If a vendor's recommendations are selected for analysis, will the agency follow-up with that agency with any questions that they may have for further clarification?	Because the objective of the RFI is to gain more insight on managed care trend analysis, the Department may request additional information from a vendor if clarification regarding a vendor's response is needed. However, such communication would not constitute any commitment by the Department that any contracts resulting from subsequent RFPs issued by the Department will be awarded to your organization.
10.		Is it possible that the language, ideology and/or methodology provided by the vendors will be directly used in a future RFP?	All information, documentation, and any specific content or approaches included within the RFI responses may be used in future solicitations, such as a future RFP. Therefore, vendors should not submit any proprietary, trade secret or confidential information in response to any aspect of this RFI. It is the vendor's responsibility for ensuring this requirement is met and the Department will not be held responsible or liable for release of said material in response to subsequent FOIA requests.
11.		What type of data will the selected offeror have access to i.e., claims history etc..?	The vendor's responses to the RFI should indicate what information and

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			data that the vendor would need to achieve the stated objectives. One of the objectives of the RFI is determine what data, resources, and information a vendor would need from the DMAS to conduct effective financial monitoring and reporting, service monitoring and reporting, and trend analysis.
12.		Will there be a small business and or veteran preference set aside requirement?	All submissions to the RFI will be reviewed, as the purpose of the RFI is to inquire about best practices in managed care trend analysis. Therefore, there will be no small business or veteran preferences as to this RFI, because all responses to the RFI will be reviewed. The Department will not use this RFI to evaluate potential vendors related to future RFPs, nor does this RFI create a contractual obligation between the Department and your organization.